

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/114,697	01/13/98	433	3732	1562-PAT

APPLICANT

MICHAEL J. POWERS, LA MESA, CA.

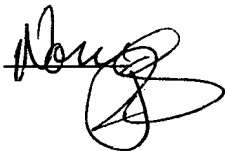
CONTINUING DOMESTIC DATA***

VERIFIED



371 (NAT'L STAGE) DATA***

VERIFIED



FOREIGN APPLICATIONS*****

VERIFIED



IGN FILING LICENSE GRANTED 08/03/98

***** SMALL ENTITY *****

Priority claimed 9 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
Acknowledged	Examiner's Initials	Initials	CA	2	9	1

MARK D GILLIAM
 BOX 200
 5 RUFFNER STREET
 SAN DIEGO CA 92111

HELD DEVICE FOR REDUCING THE DISCOMFORT ASSOCIATED WITH THE
 ADJUSTING OF ORTHODONTIC APPLIANCES

195	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____
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